



# Enfermería Intensiva

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## ORIGINAL ARTICLE

### Communication skills in ICU and adult hospitalisation unit nursing staff<sup>☆</sup>

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#### KEYWORDS

Nursing;  
Critical care;  
Social skills;  
Communication

#### Abstract

**Objectives:** In this study researchers are trying to analyse the personality factors related to social skills in nurses who work in: intensive care units, ICU, and hospitalisation units. Both groups are from the Madrid Health Service (SERMAS).

**Method:** The present investigation has been developed as a descriptive transversal study, where personality factors in ICU nurses (n = 29) and those from hospitalisation units (n = 40) were compared. The 16PF-5 questionnaire was employed to measure the personality factors associated with communication skills.

**Results:** The comparison of the personality factors associated to social skills, communication, in both groups, show us that nurses from ICU obtain in social receptivity: 5.6 (A+), 5.2 (C-), 6.2 (O+), 5.1 (H-), 5.3 (Q1-), and emotional control: 6.1 (B+), 5.9 (N+). Meanwhile the data does not adjust to the expected to emotional and social expressiveness, emotional receptivity and social control, there are not evidence.

**Conclusions:** The personality factors associated to communication skills in ICU nurses are below those of hospitalisation unit nurses. The present results suggest the necessity to develop training actions, focusing on nurses from intensive care units to improve their communication social skills.

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**PALABRAS CLAVE**

Enfermería;  
Cuidados críticos;  
Habilidades sociales;  
Comunicación

**Habilidades de comunicación en enfermeras de UCI y de Hospitalización de adultos****Resumen**

**Objetivos:** Como objetivo de este estudio nos planteamos analizar los rasgos de personalidad asociados a las habilidades sociales de las enfermeras que trabajan en las unidades de cuidados intensivos (UCI) y las enfermeras que trabajan en unidades asistenciales de hospitalización de adultos, ambos grupos pertenecientes al Servicio Madrileño de Salud (SERMAS).

**Método:** Se realizó un estudio descriptivo transversal con 69 enfermeras del SERMAS, de las cuales 29 eran enfermeras asistenciales de UCI y 40 enfermeras de Hospitalización, utilizando el cuestionario 16PF-5, para medir los factores de personalidad ligados a las habilidades sociales.

**Resultados:** En el grupo de enfermeras de UCI aparecieron factores ligados a habilidades sociales en receptividad social: 5,6 (A+), 5,2 (c-), 6,2 (O+), 5,1 (H-), 5,3 (Q1-) y en control emocional: 6,1 (B+), 5,9 (N+). No se encontraron factores asociados a expresividad emocional, expresividad social, receptividad emocional y control social.

**Conclusiones:** Los valores encontrados para los rasgos y factores de personalidad asociados a las habilidades sociales de comunicación en enfermeras de UCI son inferiores a los encontrados en las enfermeras de Hospitalización. Consideramos clave realizar actividades de intervención y formación específica para desarrollar las habilidades sociales de comunicación en las enfermeras de UCI.

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**What is known/what is the contribution of this?**

Social skills associated with communicating with patients and their family are particularly relevant in the health-care we provide, both in intensive care units (ICU) and in other care units where nurses work. There are various articles that analyse the importance of communication between nurses, relatives and patients on the ICU, but we have not found any recent studies that assess such skills as proven tools for ICU nurses.

The contribution of this research is to validate a questionnaire to be used to gauge social skills associated with communication, 16PF-5, and to make it possible to check that ICU nurses have such skills compared with admissions nurses and the general public.

Only if we check this and assess it, will we be able to know which social skills the professional body has and which they do not, and we will be able to put improvement measures in place, should it be necessary.

**Implications of the study**

The implications of the study involve bringing to light the social skills associated with communication that ICU nurses have in a sample from the Madrid Health Service. The aim is to raise the profile of communication with relatives and ICU patients, to be used as an example for monitoring that personality factors associated with social skills in other ICUs. This will act as a tool for improvement for increasing the quality that the relatives and patients experience.

**Introduction**

In their line of work, nurses working in intensive care units (ICUs) have to deal with very difficult situations: the type of patients they care for are in a life-or-death situation, they often have to deal with death; they have higher mortality rates than the rest of the hospital. They have to go through the pain and suffering of the relatives and loved-ones of the patients who have been admitted to the ICU. This opens up the possibility that nursing professionals could have a profile and behavioural traits different to those in other care departments in the hospital, such as Admissions.

Nursing is a career that is both scientific and humanistic, and it is based on both biological and behavioural science. At the ICU, it is of the utmost importance to keep the close relatives informed and cared for, due to the specific characteristics of the patient, (sedated, intubated, in a coma, etc.), which makes it very difficult to communicate with the patient directly and makes for very distinct working conditions on these types of units.<sup>1</sup>

Intensive care nurses are carrying out checks on the patient 24/7. Families value the nurses' skills, especially efficient communication, which is deemed to be one of the most important skills of health-care staff working at the ICU.<sup>2</sup>

In nursing, the care relationship is based on attitude, skills and relationships that develop over the course of the care provided to patients and their relatives. An important aspect of this relationship is active listening.<sup>3</sup>

From an ICU management and organisational point of view, one of the key aspects is information and communication with the families. It is important to treat the families as part of the patients' environment, since the complexity and severity of the situation in ICUs are much greater and generate tense situations and high levels of stress in the families of this type of patients.<sup>4,5</sup>

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